

AUG 1 2 2002

K021749 P1/2

510(k) Summary

This 510(k) Summary for the EBI® DynaFix® VST™ Osteotomy System is provided as required per Section 513(I)(3) of the Food, Drug and Cosmetic Act.

1. Sponsor:
EBI, L.P.
100 Interpace Parkway
Parsippany, NJ 07054

Contact Person: Jon Caparotta, RAC
Telephone: (973) 299-9300, ext.3964

Date Prepared: May 24, 2002

2. Proprietary Name: EBI® DynaFix® VST™ Osteotomy System

Common Name: Bone Plate and Accessories

Classification Name: Single/Multiple Component Metallic Bone Fixation Appliances and Accessories, 21 CFR 888.3030.

3. Predicate or Legally Marketed Devices:

- EBI® DynaFix® VST™ Osteotomy System (K010551)

4. Description of Device:

The System consists of an osteotomy plate and bone screws. This submission is for the addition of plate sizes.

5. Intended Use:

The EBI DynaFix® VST™ Osteotomy System is intended for fixation following acute corrective opening wedge osteotomies in long bone.

6. Materials:

The components of the System are manufactured from titanium alloy (Ti-6Al-4V) per ASTM F136.

7. Comparison of the technological characteristics of the device to predicate devices:

There are no significant differences between the modified EBI DynaFix[®] VS[™] Osteotomy System and the currently marketed System. The EBI DynaFix VS Osteotomy System is substantially equivalent* to the predicate device in regards to intended use, material, and function.

*Any statement made in conjunction with this submission regarding a determination of substantial equivalence to any other product is intended only to relate to whether the product can be lawfully marketed without pre-market approval or reclassification and is not intended to be interpreted as an admission or any other type of evidence in patent infringement litigation. [Establishment Registration and Premarket Notification Procedures, Final Regulation, Preamble, August 23, 1977, FR 42520 (Docket No. 76N-0355.)]



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

AUG 12 2002

Mr. Jon Caparotta, RAC
Manager, Regulatory Affairs
EBI, L.P.
100 Interpace Parkway
Parsippany, New Jersey 07054

Re: K021749

Trade/Device Name: EBI® DynaFix® VS™ Osteotomy System
Regulation Number: 21 CFR §888.3030
Regulation Name: Single/multiple component metallic bone fixation appliances and accessories
Regulatory Class: Class II
Product Code: NDF and NDH
Dated: May 24, 2002
Received: May 28, 2002

Dear Mr. Caparotta;

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

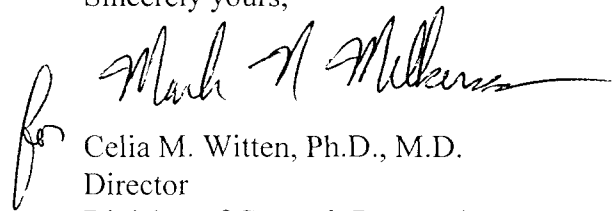
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

A handwritten signature in black ink, appearing to read "Celia M. Witten", is written over a large, stylized initial "C" or "W".

Celia M. Witten, Ph.D., M.D.
Director
Division of General, Restorative
and Neurological Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Statement of Indications for Use

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510(k) Number (if known): K021749

Device Name: EBI[®] DynaFix[®] VS[™] Osteotomy System

Indications For Use:

The EBI[®] DynaFix[®] VS[™] Osteotomy System is intended for fixation following acute corrective opening wedge osteotomies in long bone.

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE
IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use _____
(Per 21 CFR 801.109)

OR

Over-The-Counter Use
(Optional Format 1-2-96)

for Mark A. Melker

(Division Sign-Off)
Division of General, Restorative
and Neurological Devices

510(k) Number K021749